

U.S. POPULATION SLATED FOR TRIAGE DEATH LISTS

Jan. 7 (IPS)--Triage--selectively choosing which patients will receive medical attention and which ones won't--is being practiced at Coney Island Hospital in Brooklyn, according to a lead article in the Jan. 5 New York Times. The article asserts that doctors at the crisis-ridden hospital--a victim of David Rockefeller's looting of the city budget--routinely force critically-ill patients to leave intensive care, almost certainly guaranteeing their death. The doctors meet nightly to decide which patients will die "to make room for those who have a better chance to survive."

This policy's scope is not limited to Brooklyn. The CIA, through this country's Civil Defense apparatus, is training physicians to implement this obscene policy nationwide in periods of Rockefeller-engineered "emergency."

Contacted today by phone, Mr. Hays, the Executive Director of the hospital, denied that those patients who were "too far gone to have a good chance" were being removed to make way for those who had a better chance of survival. But Hays refused to reveal the name of the doctor who was the Times' informant, claiming "I don't want to embarrass the man." Alan Gershuney, Assistant Director of Communications and Public Affairs of the New York City Health and Hospitals Corporation, told IPS that he thought Coney Island triage practitioners were "trying to use this to raise people's awareness--triage is practiced routinely--it's not what you think."

Where This "Awareness" Comes From

Sources in the United States Navy, the CIA's Agency for International Development (AID), and Washington, D.C.-area hospitals revealed this week that triage is being taught to medical doctors by the Civil Defense authorities under leadership of the Pentagon's Defense Civil Preparedness Agency (DCPA). Participants in "simulated disasters"--joint military-civilian exercises--are being trained in the routine of deciding who must die based on what officials call the "reality of scarce resources to deal with a large-scale disaster."

Although the Navy freely referred to one of its personnel in a recent disaster-planning exercise as a "triage officer," Civil Defense authorities are reportedly cautioning doctors undergoing the training not to use the term "triage" in public because of its odious associations.

Thus, the DCPA is plotting mass murder under the cover of meeting emergencies--either natural or of its own making.

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The Bloody Trail

Triage has evolved from a reserve policy option to an active policy within the last few years. First introduced as a solution to the food crisis in 1967 by William Paddock (see Jan. 8 article), triage was publicly scorned by Rockefeller Foundation spokesmen and others as "medieval" and "illogical."

Sometime in the past two years, George Szeigo, an operative for the Pentagon think-tank, the Institute for Defense Analysis (IDA), confidentially briefed IDA staff members on the policy planning requirements for mass-scale implementation of triage. The briefing--preparatory to the shift to triage as active policy--focused on the insane question: given developing shortages of food, energy, and other supplies, where the death of a substantial portion of the population is unavoidable, who will die? Given these unfortunate shortages, which sociological and regional layers--in the United States as well as internationally--will be deliberately condemned to death due to deprivation of food, medical supplies, and employment, and what are the political-military implications of this decision?

Triage first received Congressional interest in 1974. John Dingell (D.-Mich.), chairman of the House Subcommittee on Fisheries and Wildlife, Conservation and the Environment, held hearings on energy, the environment, food, population, and land. "Experts" called on to appear included Lester Brown of the genocidal Overseas Development Council; Russel Peterson of Rockefeller's Commission on Critical Choices; Dennis Meadows, co-author of the zero-growth bible, Limits to Growth; and Steve Salyer, John D. Rockefeller III's personal spokesman.

In the final session Garrett Hardin, psychotic-in-residence at the University of California at Santa Barbara, proposed "triage" as the "hard, logical" reality. Witnesses, Dingell and Subcommittee counsel Frank Potter were in complete agreement: millions must die. As Hardin put it in the October Psychology Today: the human race is a cancer--and you don't feed a cancer.

EUROPEAN FINANCE MINISTERS FUMBLE; DOLLAR AT ALL-TIME LOW

Jan. 7 (IPS)--European finance ministers failed today at their London meeting to come up with the stopgap measures needed to prevent a general international monetary breakdown within weeks. Despite rumors of a U.S.-European emergency compromise during the past two weeks, all that the befuddled ministers could put together was a proposed new IMF account to handle \$6 to \$12 billion, compared to an annual petrodollar flow of more than \$100 billion--which will be functional by April at the earliest, according to British Chancellor of the Exchequer Denis Healey.